### FORM D

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# UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

# FORM D

OMB APPROVAL
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SEC USE ONLY							
Prefix	Serial						
DATE RECEIV	/ED						
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NOTICE OF SALE OF SECURITIES

PURSUANT TO REGULATION D,

SECTION 4(6), AND/OR

UNIFORM LIMITED OFFERING EXEMPTION

Name of Offering ( check if this is an amendment and name has changed, and indicate change.) El Paseo Collection III, L.P. Debt Offering Rule 504 Rule 505 Rule 506 Section 4(6) ULOE Filing Under (Check box(es) that apply): Type of Filing: New Filing Amendment A. BASIC IDENTIFICATION DATA Enter the information requested about the issuer Name of Issuer ( check if this is an amendment and name has changed, and indicate change.) El Paseo Collection III, L.P. (Number and Street, City, State, Zip Code) Telephone Number (Including Area Code) Address of Executive Offices 5900 Wilshire Boulevard, Suite 400, Los Angeles, California 90036 323-937-7110 Address of Principal Business Operations (Number and Street, City, State, Zip Code) Telephone Number (Including Area Code) (if different from Executive Offices) Brief Description of Business **PROCESSED** Real Estate Investment other (please shull) 0 2 2008 Type of Business Organization corporation limited partnership, already formed business trust limited partnership, to be formed THOMSON REUTERS Month Year Actual or Estimated Date of Incorporation or Organization: 0.17 📝 Actual 🔲 Estimated 015Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State: CN for Canada; FN for other foreign jurisdiction) CIA

#### GENERAL INSTRUCTIONS

#### Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

#### State

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

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Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predictated on the filing of a federal notice.

		A. BASIC ID	ENTIFICATION DATA		
2 Enter the information re	quested for the fol	lowing:			
Each promoter of to	he issuer, if the iss	sucr has been organized w	vithin the past five years;		
<ul> <li>Each beneficial ow</li> </ul>	ner having the pow	er to vote or dispose, or di	rect the vote or disposition	of, 10% or more of	a class of equity securities of the issu
<ul> <li>Each executive off</li> </ul>	icer and director o	f corporate issuers and of	corporate general and man	naging partners of p	partnership issuers; and
<ul> <li>Each general and r</li> </ul>	nanaging partn <del>e</del> r o	f partnership issuers.			
Check Box(es) that Apply.	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, i	ť individual)				
FFP - EPC III, LLC, a Ca		ability company			
Business or Residence Addre 5900 Wilshire Boulevard	ss (Number and	Street, City, State, Zip C		<u></u>	
Check Box(es) that Apply.	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, J. Lampert Levy Living T	,				
Business or Residence Addre	ss (Number and	Street, City, State, Zip C	ode)		
2222 Avenue of the Stars	, Suite 2201, Lo	s Angeless, California	90067		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first.	(f individual)				
Business or Residence Addre	ess (Number and	Street, City, State, Zip C	ode)		
Check Box(es) that Apply:	Promoter'	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first,	if individual)				
Business or Residence Addre	ess (Number and	Street, City, State, Zip C	ode)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first,	if individual)				
Business or Residence Addre	ess (Number and	Street, City, State, Zip C	ode)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first.	if individual)				
Business or Residence Addr	ess (Number and	Street, City, State, Zip C	`ode)		
Check Box(cs) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first,	if individual)	, <u></u>			
Business of Residence Addr	ess (Number and	Street, City, State, Zip C	Code)		
	(Use bla	ank sheet, or copy and us	e additional copies of this	sheet, as necessary	<u> </u>

				B. IN	FORMATI	ON ABOU	r offeri	NG				
										Yes	No FF	
I. Has the	Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?									<u></u>	K	
2. What is	Answer also in Appendix, Column 2, if filing under ULOE.  What is the minimum investment that will be accepted from any individual?								<sub>\$</sub> 25,0	00.00		
	what is the minimum investment that will be accepted from any individual;								Yes	No		
	ne offering										×	
commi If a per or state	he informat ssion or sim son to be lis es. list the na er or dealer,	ilar remune ted is an ass ime of the b	ration for s sociated pe roker or de	olicitation rson or age aler. If mo	of purchase nt of a brok ore than five	ers in conne er or deale e (5) persor	etion with r registered is to be list	sales of sec I with the S ed are asso	urities in th EC and/or	ie offering. with a state		
Full Name	(Last name	first, if indi	ividual)									
Business or	Residence	Address (N	lumber and	l Street, Ci	ty, State, Z	ip Code)						
Name of As	ssociated Br	oker or De	aler									
States in W	hich Persor	Listed Has	s Solicited	or Intends	to Solicit I	Purchasers						
(Check	"All States	s" or check	individual	States)							☐ All	States
AL	AK	ĀZ	ĀR	CA	CO	CT	DE	DC	FL	GA	HI]	ID
TL MT RI	NE SC	IA NV SD	KS NH TN	KY NJ TX	LA NM UT	ME NY VT	MD NC VA	MA ND WA	MI OH WV	MN OK WI	MS OR WY	MO PA PR
Full Name	(Last name	first, if ind	ividual)			-	• • • • • • • • • • • • • • • • • • • •					
Business o	r Residence	: Address (l	Number an	d Street. C	City, State,	Zip Code)						
Name of A	ssociated B	roker or De	aler									
States in W	hich Persor	ı Listed Ha	s Solicit <b>e</b> d	or Intends	to Solicit	Purchasers		<u>.</u>			<u> </u>	
(Checl	k "Ali State	s" or check	individua	States)	.,.,,						☐ AI	l States
AL IL MT	AK IN NE SC	AZ IA NV SD	AR KS NH TN	CA KY NJ TX	CO LA NM UT	ME NY VT	MD NC VA	MA ND WA	FL MI OH WV	GA MN OK WI	HI MS OR WY	MO PA PR
Full Name	(Last name	first, if ind	lividual)	· · · · ·	<u></u>							
Business of	or Residence	e Address (	Number ar	nd Street, C	City, State,	Zip Code)						
Name of A	ssociated B	roker or De	ealer									
States in W	hich Perso	n Listed Ha	s Solicited	or Intend	s to Solicit	Purchasers			··	<del></del> -		
(Chec	k "All State	s" or check	individua	l States)							. <u> </u>	1 States
AL IL MT	AK IN NE SC	IA NV SD	AR KS NH TN	CA KY NJ TX	CO LA NM UT	CT ME NY VT	DE MD NC VA	DC MA ND WA	FL MI OH WV	GA MN OK WI	MS OR WY	MO PA PR

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

# C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

	already exchanged.  Type of Security	Aggregate Offering Price	Amount Afready Sold
	Debt	5,500,000.00	\$ 2,950,000.00
	Equity		\$
	Common Preferred	ມ <u></u>	<b>\$</b>
	Convertible Securities (including warrants)	\$	\$
	Partnership Interests	\$	\$
	Other (Specify)		
	Total	\$_5,500,000.00	\$_2,950,000.00
	Answer also in Appendix, Column 3, if filing under ULOE.		
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."		Aggregate
		Number Investors	Dollar Amount of Purchases
	Accredited Investors	15	\$ 2,950,000.00
	Non-accredited Investors		\$
	Total (for filings under Rule 504 only)	********	\$
	Answer also in Appendix, Column 4, if filing under ULOE.		
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1.		
	Type of Offering	Type of Security	Dollar Amount Sold
	Rule 505		\$
	Regulation A		\$
	Rule 504		\$
	Total		<u>\$_0.00</u>
4	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
	Transfer Agent's Fees		\$
	Printing and Engraving Costs		\$
	Legal Fees		\$
	Accounting Fees		\$
	Engineering Fees		\$
	Sales Commissions (specify finders' fees separately)		\$
	Other Expenses (identify)	_	\$
	Total		s 0.00

Ц.,				
	b. Enter the difference between the aggregate offe and total expenses furnished in response to Part C — proceeds to the issuer."	· ·	SS	\$
5.	Indicate below the amount of the adjusted gross preach of the purposes shown. If the amount for a check the box to the left of the estimate. The total of proceeds to the issuer set forth in response to Pa	my purpose is not known, furnish an estimate ar of the payments listed must equal the adjusted gro	nd	
	,	`	Payments to Officers, Directors, & Affiliates	Payments to Others
	Salaries and fees		🎵 💲	<b>5</b>
	Purchase of real estate		<del>_</del>	_
	Purchase, rental or leasing and installation of ma	achinery		_
	Construction or leasing of plant buildings and fa	icilities	🔲 \$	\$
	Acquisition of other businesses (including the va offering that may be used in exchange for the assissuer pursuant to a merger)	sets or securities of another	🔲 \$	5,500,000.00
	Repayment of indebtedness		🔲 \$	\$
	Working capital		🔲 \$	\$
	Other (specify):		\$	
			- 🔲 \$	_ [] \$
	Column Totals		S 0.00	\$5,500,000.00
	Total Payments Listed (column totals added)		\_\$_5	,500,000.00
		D. FEDERAL SIGNATURE		
Sig	e issuer has duly caused this notice to be signed by th nature constitutes an undertaking by the issuer to fu information furnished by the issuer to any non-ac	urnish to the U.S. Securities and Exchange Comn	nission, upon writt	
lss	uer (Print or Type)	Signature /	Date	
E	Paseo Collection III, L.P.	14/4	May 20, 2008	
Na	me of Signer (Print or Type)	Title of Signer (Print or Type)		
Fre	d A. Fern	Manager of FFP - EPC III, LLC, as General	Partner of Issuer	

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

# ATTENTION —

	E. STATE SIGNATURE		
1.	Is any party described in 17 CFR 230.262 presently subject to any of the disqualification provisions of such rule?	Yes	No <b>≭</b> I

See Appendix, Column 5, for state response.

- 2. The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed a notice on Form D (17 CFR 239.500) at such times as required by state law.
- 3. The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.
- 4. The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.

The issuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person.

Issuer (Print or Type)	Signature	Date		
El Paseo Collection III, L.P.		May 20, 2008		
Name (Print or Type)	Title (Print or Type)	, , , , , , , , , , , , , , , , , , ,		
Fred A. Fern	Manager of FFP - EPC III, LLC, as General Partner of Issuer			

#### Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

				AF	PPENDIX					
1	Intend to non-a investor	2 I to sell ccredited s in State -Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)		4  Type of investor and amount purchased in State  (Part C-Item 2)				5 Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)	
State	Yes	No		Number of Accredited Investors	Number of Number of Accredited Non-Accredited					
AL		_					<u></u>			
AK							1			
AZ	·	<del>.</del>								
AR						***				
CA		×	\$5,500,000	13	\$2,750,000.				×	
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L	<del></del>			APP	ENUIX					
1	Intend to non-a	2 I to sell accredited rs in State I-Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)	4  Type of investor and amount purchased in State  (Part C-Item 2)				5 Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)		
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No	
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APPENDIX

				APP	ENDIX				
1		2	3		5 Disqualificatio				
	to non-a	d to sell accredited is in State B-Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)	Type of investor and		amount purchased in State			
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
WY									
PR									

**END**